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Priority Number	Serial Number or International Application Number	Attorney Docket Number	H 4132 PCT US
		First Named Inventor	Fabry, Bernd
COMPLETE IF KNOWN			
Declaration Submitted with Initial Filing	OR	Declaration Submitted after Initial Filing	Application Number
<input checked="" type="checkbox"/>			
			Filing Date
			Group Art Unit
			Examiner Name

As a below-named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

COSMETIC OR PHARMACEUTICAL UTILIZATION OF NANOSCALIC METAL SOAPS

the specification of which

Title of the Invention is attached hereto

OR

 was filed on (MM DD YYYY)

as United States Application Number or PCT International

Application Number and was amended on (MM DD YYYY) (if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 35 Code of Federal Regulations, § 1.56

I hereby claim foreign priority benefits under Title 35, United States Code §119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT International application which designated at least one country other than the United States of America listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM DD YYYY)	Priority Not Claimed	Certified Copy Attached?	
			YES	NO	
199 20 555.8	Germany	05/05/1999	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

 Additional foreign application numbers are listed on a supplemental priority sheet attached hereto

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below

Application Number(s)	Filing Date (MM DD YYYY)	Additional provisional application numbers are listed on a supplemental priority sheet attached hereto
<input type="text"/>	<input type="text"/>	<input type="checkbox"/>

Burden Hour Statement: This form is estimated to take .4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO Assistant Commissioner for Patents, Washington DC 20231.

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DECLARATION

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I hereby claim the benefit under Title 35, United States Code, §120, of any United States application(s), or 365(c) of any PCT international application, designating the United States of America as the subject matter Office, filed prior to the date hereof, and I acknowledge that I am the inventor of the United States or PCT international application, in the manner provided by the first paragraph of Title 35, United States Code, §112. I acknowledge the duty to disclose information which is material to patentability as defined in Title 35, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
	PCT/EP00/03763	04/26/2000	

Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto

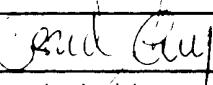
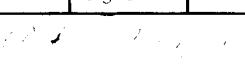
As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business of the Patent and Trademark Office concerning therewith:

<input type="checkbox"/> Firm Name _____	<input type="checkbox"/> Customer Number _____	Date _____	
OR			
<input checked="" type="checkbox"/> List Attorney(s) and/or agent(s) name and registration number below			
Name	Registration Number	Name	Registration Number
John E. Drach	32,891	Steven J. Trzaska	36,296
Aaron E. Ettelman	42,516	Henry E. Millson, Jr.	18,980

Additional attorney(s) and/or agent(s) named on a supplemental sheet attached hereto

Please direct all correspondence to		<input checked="" type="checkbox"/> Customer Number _____ or label _____	23657	OR <input type="checkbox"/> Fill in correspondence address below
Name				
Address				
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City	State	Zip		
Country	Telephone	610-278-4929	Fax	610-278-6548

hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name	Bernd		Middle Initial		Family Name	FABRY		Suffix e.g. Jr.	
Inventor's Signature						Date			
Residence: City	Korschenbroich	State		Country	Germany	Citizenship	German		
Post Office Address	Danziger Strasse 31								
Post Office Address									
City	41352 Korschenbroich	State	Zip	Country	Germany	Applicant Authority			
<input checked="" type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto									

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DECLARATION					ADDITIONAL INVENTOR(S) Supplemental Sheet				
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name	Achim		Middle Initial		Family Name	ANSMANN		Suffix e.g. Jr.	
Inventor's Signature	<i>Achim Ansmann</i>					Date			
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Post Office Address	Kirchberg 25								
Post Office Address									
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Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name			Middle Initial		Family Name				Suffix e.g. Jr.
Inventor's Signature						Date			
Residence: City			State		Country			Citizenship	
Post Office Address									
Post Office Address									
City			State		Zip		Country		Applicant Authority
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name			Middle Initial		Family Name				Suffix e.g. Jr.
Inventor's Signature						Date			
Residence: City			State		Country			Citizenship	
Post Office Address									
Post Office Address									
City			State		Zip		Country		Applicant Authority
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name			Middle Initial		Family Name				Suffix e.g. Jr.
Inventor's Signature						Date			
Residence: City			State		Country			Citizenship	
Post Office Address									
City			State		Zip		Country		Applicant Authority
<input type="checkbox"/>	Additional inventors are being named on supplemental sheet(s) attached hereto								